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Substitute for form 1449/PTO <div style="text-align: center;"> INFORMATION DISCLOSURE STATEMENT BY APPLICANT </div> <div style="text-align: center;"> <i>(Use as many sheets as necessary)</i> </div>				<i>Complete if Known</i>	
				Application Number	10/671,128-Conf. #7268
				Filing Date	September 24, 2003
				First Named Inventor	Jeffrey L. Wise
				Art Unit	2443
				Examiner Name	Not Yet Assigned
				Attorney Docket Number	1400B-000025/US
Sheet	2	of	2		

[illegible]

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.